

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL  
FORM**

(To be used for all correspondence after initial filing)

Application Number	10/714,388
Filing Date	November 14, 2003
First Named Inventor	Randal A. Hatrick
Art Unit	3764
Examiner Name	Unknown
Total Number of Pages in This Submission	2
Attorney Docket Number	03DD-108270

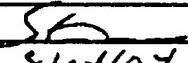
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**OFFICIAL****ENCLOSURES (Check all that apply)**

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<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavit/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application		<b>Remarks</b>
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Steven R. Vosen, Ph. D. Registered Patent Agent
Signature	
Date	8/24/04

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Steven Vosen
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Date	8/24/04

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PTO/SB/82 (09-03)

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**REVOCATION OF POWER OF  
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NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/714,388
Filing Date	November 14, 2003
First Named Inventor	Randal A. Hetrick
Art Unit	3764
Examiner Name	Unknown
Attorney Docket Number	03DD-108270

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 40280

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number: 40280

OR

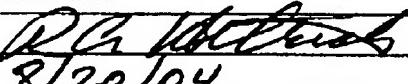
<input type="checkbox"/> Firm or Individual Name			
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Address			
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Randal A. Hetrick		
Signature			
Date	8/20/04	Telephone	415 378 3424

NOTE: Signatures of all inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_\_\_ forms are submitted.

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